24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee Senate Conservatives Fund	Date	e of Public Distribution/Dissemination
		01 25 2014
Mailing Address PO Box 388		punt
City State Zip Code		850.95
Alexandria VA 22313		nsaction ID: E48FD2EF5AC3F431D8C8 e of Disbursement or Obligation
	gory/ Type	01 25 2014
Name of Federal Candidate	Support Office Soug	ght: House District:
Matthew Griswold Bevin	Oppose Presi	ident Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 76350.		ent For:
Full Name of Payee	Date	e of Public Distribution/Dissemination
ASG Marketing		01 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2020 Pennsylvania Ave NW	Amo	ount
City State Zip Co	ode	15707.50
Washington DC 20006		saction ID : E2BF814D058594037AD9 e of Disbursement or Obligation
	gory/ Type	01 30 / 2014
Name of Federal Candidate	Support Office Sou	ght: House District:
Matthew Griswold Bevin	Oppose Pres	ident X Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 99:	329.47 Disburseme	ent For:
(a) SURTOTAL of Itamized Independent Expanditures		
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Paul Kilgore [Electronically F.	illed] Date 01	31 2014
Signature		